

State of Indiana Public Defender Commission

CERTIFICATION OF STANDARDS E AND F QUALIFICATIONS

Name: Atty. #									
Date Admitted to India	ana Bar:								
County:									
Telephone: Office	Cell								
Facsimile									
Email									
	Murder Cases								
Yes No									
1. [Do you have at least three (3) years of c	riminal litigation experi	ence?						
	Do you have prior experience as lead or								
• •	trials of Class C or Level 5 felonies or h	igher that went to verd	ict? If yes,						
Client's Name	vide the following information: Cause Number	Date of trial	rial County						
(1)			,						
(2)									
(3)									
Levels 1-4 Felony Cases									
	LEVEIS 1-4 I CIUIIV Ca	1262							
Yes No	Levels 1-4 relotly Ca	1363							
	Do you have at least two (2) years of cri		nce?						
1. [Do you have at least two (2) years of cri Do you have prior experience as lead or	minal litigation experie co-counsel in at least t	wo (2)						
1. [1. [2. [1. [2. [4. [4. [4. [4. [4. [4. [4. [4. [4. [4	Do you have at least two (2) years of cri Do you have prior experience as lead or ny jury trials that went to verdict OR or	minal litigation experie co-counsel in at least t ne (1) felony jury trial a	wo (2) nd one						
1. [1. [Do you have at least two (2) years of cri Do you have prior experience as lead or ny jury trials that went to verdict OR or Indiana Public Defender Commission ap	minal litigation experie co-counsel in at least t ne (1) felony jury trial a	wo (2) nd one						
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1. [2. [felo (1) If ye	Do you have at least two (2) years of cri Do you have prior experience as lead or ny jury trials that went to verdict OR or Indiana Public Defender Commission ap	minal litigation experie co-counsel in at least t ne (1) felony jury trial a	wo (2) nd one						
1. [2. [felo (1) felo (1) fyection (1) fyec	Do you have at least two (2) years of cri Do you have prior experience as lead or my jury trials that went to verdict OR or Indiana Public Defender Commission ap es, provide the following information:	minal litigation experie co-counsel in at least t ne (1) felony jury trial a proved trial practice co	wo (2) nd one ourse?						
1. [2. [felo (1)	Do you have at least two (2) years of cri Do you have prior experience as lead or my jury trials that went to verdict OR or Indiana Public Defender Commission ap es, provide the following information:	minal litigation experie co-counsel in at least t ne (1) felony jury trial a proved trial practice co	wo (2) nd one ourse?						

	Level 5 Felony Cases										
	Yes	No	_ 1. Do you have at least one (1) year of criminal litigation experience? OR								
		2. Do you have prior experience as lead or co-counsel in at least three (3)									
-			crim	inal jury trials that went to	o verdict? If yes, provide	e the following					
		information:									
	Client's	Name		Cause Number	Date of Trial	County					
(1)											
(2)											
(3)											
	Juvenile Delinquency Cases										
Α. \	WAIVER CA	ASES OR I	MURE	DER LEVEL JUVENILE CASE	S						
	Yes	No									
_			_	o you have at least three	(3) years of criminal law	or juvenile delinquency					
				rience?							
_			- '			insel in at least three (3) felony					
			jury	trials that were Class C or	, -	and tried to completion?					
					OR						
	(B) Do you have prior experience as lead or co-counsel in at least three (3) juvenile										
		trials that would have been Class C felonies or higher if committed as an adult and were									
			tried to completion?								
				If yes to either, please provide the following information:							
()	Client's	Name		Cause Number	Date of Trial	County					
(1)											
(2)											
(3)											
Α. Ι			EVEL	JUVENILE CASES							
	Yes	No									
_			_	o you have at least two (2) years of criminal law o	or juvenile delinquency					
	experience?										
_			- '			insel in at least two (2) felony					
	jury trials that were tried to completion?										
	OR										
-	(B) Do you have prior experience as lead or co-counsel in at least two (2) juvenile trials										
	that would have been felonies if committed as an adult and were tried to completion?										
	If yes to either, please provide the following information:										
	Client's	Name		Cause Number	Date of Trial	County					
(1)						, , , , , , , , , , , , , , , , , , ,					
(2)											
ι-,					1						

Juvenile Delinquency Cases											
C. OTHER JUVENILE DE	ELINQUENCY CAS	ES									
Yes No											
		at least one (1).		المام المسالة							
	1. Do you nave			uvenile delir	nquency proceedings?						
	OR										
	– 2. Do you have	prior experience	as lead or co-counse	l in at least c	one (1) case of the						
	2. Do you have prior experience as lead or co-counsel in at least one (1) case of the same class or higher that was tried to completion in either adult or juvenile court? OR										
	3. Do you have	experience in tw	o comparable cases t	ried to comp	oletion in juvenile						
	court under the	supervision of a	n attorney qualified t	o litigate suc	ch cases?						
			e provide the followi	ng informati							
Client's Name	Cause	Number	Date of Trial		County						
(1)											
(2)											
If these are juvenile cases, list the supervising attorneys:											
		CHINS and	TPR Cases								
A. TERMINATION OF	PARENTAL RIGHT	S AND CHILDREN	I IN NEED OF SERVIC	ES CASES							
Yes No											
	_ 1. Do you have		1) year experience in OR	TPR litigatio	n?						
	_2. Have you litig		e (1) TPR to completion	on?							
	3. Have you cor	mpleted at least	six (6) hours of trainir	ng in CHINS/1	ΓPR practice in a						
	course approve	d by the Indiana	Public Defender Com	mission?							
		Appellate	Counsel								
Yes No											
	– '	` '	years of criminal litig								
		•	• •		te practice in a course						
	approved by the	e Indiana Public [Defender Commission	?							
I have complete	I have completed the following training in appellate practice as required by Standard F of the										
Standards for Indigent Defense Services in Non-Capital Cases:											
Seminar Title	Sponsor	Locatio	n D	ate	Hours						
	<u></u>										

Signature: Date:

Return to: Indiana Public Defender Commission
30 South Meridian Street, Suite 500
Indianapolis, Indiana 46204-3568

I hereby affirm under the penalties for perjury that the foregoing statements are true and correct to the best

Telephone (317) 232-2542 Fax (317) 233-6586